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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number		10/568,111
	Filing Date		(Int'l) August 12, 2004
	First Named Inventor		Dale Howard HRECZUK-HIRST
	Title	POLYSIALIC ACID DERIVATIVES	
	Art Unit	1623	
	Examiner Name	E. Olson	
	Attorney Docket No.	429022001300	

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Practitioners associated with the Customer Number:

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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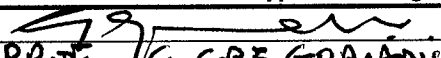
Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	7 JAN. 09
Name	PROF. G. GREGORIADIS	Telephone	++441923820104
Title and Company	DIRECTOR AND CSO LIPOXEN PLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ Total of 1 forms are submitted.